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FLOAT PLAN

INSTRUCTIONS: Complete this plan before you go boating and leave it with a reliable person who can be depended upon to notify the Coast Guard, or other rescue organization, should you not return or check-in as scheduled. If you have a **change of plans** after leaving, be sure to notify the person holding your Float Plan.



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Do **NOT** file this plan with the Coast Guard.

VESSEL

IDENTIFICATION:

Name & Port _____
Document / Registration No. _____
Year / Make _____
Length _____ Type _____
Hull & Trim Color _____
Unique Feature(s) _____

COMMUNICATIONS: (Check all onboard & supply requested information)

Radio Call Sign: _____
DSC MMSI Number: _____
Cockpit Radio-1: Type _____ Ch / Freq. Monitored _____
Cockpit Radio-2: Type _____ Ch / Freq. Monitored _____
Handheld Radio: Type _____ Ch / Freq. Monitored _____
Cell Phone: _____
Other _____

PROPULSION:

Primary: _____ hp _____ Fuel Capacity _____
Auxiliary: _____ hp _____ Fuel Capacity _____

NAVIGATION: (Check all onboard)

Maps Charts Compass Navigation Rules
 GPS Radar Loran C _____

SAFETY & SURVIVAL

PFDs: (Specify quantity)

____ Type I
____ Type II
____ Type III
____ Type IV
____ Type V

VISUAL DISTRESS SIGNALS: (Specify quantity)

____ Mirror (Day only)
____ Red or Orange Distress Flag (Day only)
____ Orange Smoke, Floating (Day & Night)
____ Red Distress Flares (Day & Night)
____ Electric distress light (Night only)

AUDIBLE DISTRESS SIGNALS:

Horn / Whistle
 Bell

MEDICAL/HEALTH:

First Aid
 Food/Water _____ (days)

GROUND TACKLE: (Check all onboard & supply requested information)

Working Anchor - line length _____ ft.
 Storm Anchor - line length _____ ft.

OTHER GEAR:

Survival Suit(s) Flashlight / Searchlight
 Safety Harness Life Rafts: _____ (Qty) Lifeboats: _____ (Qty)
 Sea Anchor EPIRB Freq: _____
 Fire Extinguisher _____

PERSONS ON BOARD

OPERATOR:

Name _____ Age _____ Sex _____ Notes (Medical Condition, Can't Swim, etc.) _____
Address _____ Home Phone _____
City _____ State _____ Zip code _____ Drivers License _____
Vehicle (Year, Make & Model) _____ License No. _____
Where will trailer be parked? _____ License No. _____

PASSENGERS:

| | Name & Home Phone | Age | Sex | Notes (Medical Condition, Can't Swim, etc.) |
|----|-------------------|-------|-------|---|
| 1. | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ |

ITINERARY

| | DATE | TIME | LOCATION | MODE OF TRAVEL | REASON FOR STOP | CHECK-IN TIME |
|--------|------|------|----------|----------------|-----------------|---------------|
| Depart | | | | | | |
| Arrive | | | | | | |
| Depart | | | | | | |
| Arrive | | | | | | |
| Depart | | | | | | |
| Arrive | | | | | | |
| Depart | | | | | | |
| Arrive | | | | | | |
| Depart | | | | | | |
| Arrive | | | | | | |

Attach Supplemental Itinerary if additional space required.

Contact 1 _____ Phone Number _____

Contact 2 _____ Phone Number _____

If you have a genuine concern for the safety or welfare of any persons on board this vessel, who have not returned or checked-in within a reasonable amount of time, then follow the step-by-step instructions on the **Boating Emergency Guide** included with this plan, or on the World Wide Web at:

<http://www.uscgaux.org/~floatplan/BoatingEmergencyGuide.htm>

BOATING EMERGENCY GUIDE

You will need the following items before you begin: 1) The **Float Plan**, if one was given to you; 2) **Pen or Pencil**; 3) Clean sheet of **paper or writing tablet**; and 4) **Telephone Directory**.

Step 1

Is there a genuine concern for the safety or welfare of any persons on board the vessel, who have not returned or checked-in within a reasonable amount of time?

If YES, continue with **Step 2**. If NO, then **Stop**. No further action is required at this time.

Step 2

Were you given a prepared Float Plan by anyone onboard the vessel?

If YES, continue with **Step 3**. If NO, then go to **Step 5**.

Step 3

On the Float Plan, locate the two contact lines, below the "Itinerary" at the bottom of the Float Plan. Call the telephone number of Contact-1.

| IF: | THEN: | | | | | | |
|--------------------------------|--|-----|-------|-----|-------------------------------|----|--|
| A person answered the phone... | Take notes during your conversation. | | | | | | |
| | 1. Let the person know that you are responding to a late return or check-in by the individuals designated on the Float Plan. | | | | | | |
| | 2. Determine if the person you are talking to, or anyone else at that location, has recently had contact with anyone on the vessel, and when and where that contact occurred. | | | | | | |
| | 3. Are you still concerned about the safety or welfare of any persons on board the vessel? | | | | | | |
| | <table border="1"> <thead> <tr> <th>IF:</th> <th>THEN:</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>Continue with Step 4.</td> </tr> <tr> <td>No</td> <td>Stop. No further action is necessary at this time.</td> </tr> </tbody> </table> | IF: | THEN: | Yes | Continue with Step 4 . | No | Stop . No further action is necessary at this time. |
| IF: | THEN: | | | | | | |
| Yes | Continue with Step 4 . | | | | | | |
| No | Stop . No further action is necessary at this time. | | | | | | |
| Otherwise... | Continue with Step 4 . | | | | | | |

Step 4

Call the telephone number for Contact-2.

| IF: | THEN: | | | | | | |
|--------------------------------|--|-----|-------|-----|-------------------------------|----|--|
| A person answered the phone... | Take notes during your conversation. | | | | | | |
| | 1. Let the person know that you are responding to a late return or check-in by the individuals designated on the Float Plan. | | | | | | |
| | 2. Determine if the person you are talking to, or anyone else at that location, has recently had contact with anyone on the vessel, and when and where that contact occurred. | | | | | | |
| | 3. Are you still concerned about the safety or welfare of any persons on board? | | | | | | |
| | <table border="1"> <thead> <tr> <th>IF:</th> <th>THEN:</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>Continue with Step 6.</td> </tr> <tr> <td>No</td> <td>Stop. No further action is necessary at this time.</td> </tr> </tbody> </table> | IF: | THEN: | Yes | Continue with Step 6 . | No | Stop . No further action is necessary at this time. |
| IF: | THEN: | | | | | | |
| Yes | Continue with Step 6 . | | | | | | |
| No | Stop . No further action is necessary at this time. | | | | | | |
| Otherwise... | Continue with Step 6 . | | | | | | |

Step 5

Take a moment to jot down the facts you know about each item in the checklist below:

Do not speculate! Speculation of a fact may mislead search and rescue personnel and add to the overall search and rescue time, adversely affecting the outcome.

- Period of time the vessel has been overdue.
- Purpose of the trip or voyage.
- Description of vessel (color, size, shape, etc.)
- Vessel's departure point and destination.
- Places the vessel planned to stop during transit.
- Navigation equipment on board (such as GPS, Compass, Maps, Charts, LORAN C, etc.)
- Survival equipment on board (life jackets, EPIRB, flares, etc.)
- Number of people on board the vessel, as well as personal habits e.g. dependability, reliability, etc.
- Was the vessel already moored, or did a vehicle tow it to the location?
- License plate number and description of the vehicle of the towing and/or crew transport vehicle.
- Communications equipment on board including radio frequencies monitored, cellular telephone numbers of people aboard.
- Additional points of contact in the area.
- Were there any pending commitments (work, appointments, etc.)?

Continue with **Step 6**.

Step 6

1. Contact your local Law Enforcement agency.
2. Let the dispatcher know that you are responding to a late return or check-in by the persons on board.
 - a. The dispatcher will guide you from there. The dispatcher will provide you with the necessary contact or agency connection (if one was not given on the Float Plan) to get a Search And Rescue (SAR) mission started. This is usually handled this way because it puts you closest to the agency conducting the rescue mission, eliminating an unnecessary middleman.
 - b. The dispatcher will let you know if they would like a follow-up call from you on the outcome.
3. The dispatcher will instruct you from there.

Continue with **Step 7**.

Step 7

Be patient... you've done everything you can possibly do for now. Stay off of the phone, so emergency personnel can contact you with additional information and/or questions concerning the Search And Rescue (SAR) effort.

End of Guide